

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------|--------|---------|
| FEE DETERMINATION | <i>W</i> | | 5/1/00 |
| O.I.P.E. CLASSIFIER | | | 5-4-00 |
| FORMALITY REVIEW | <i>M. M.</i> | 71628 | 6-28-00 |
| RESPONSE FORMALITY REVIEW | <i>M. M.</i> | 71628 | 7-26-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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| 149 | | | |
| 150 | | | |

If more than 150 claims or 10 actions
 staple additional sheet here

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